Fill in this information to identify the case:	
Debtor 1 Kimberly K. Mitchell	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Case number 2:17-bk-53597	District of Ohio (State)

	o Notice of	Final C	ure Pa	ymei	nt		10/15
ccording to Bankrupt	cy Rule 3002.1(g), the	creditor respon	ds to the tru	ıstee's not	tice of 1	inal cure	payment.
Part 1: Mortgage	Information						
Name of creditor:	U.S. Bank Trust National Association, as Trustee of the					Court claim no. (if known):	
Name of Cleditor.	Bungalow Series IV Trust						<u>5-1</u>
Last 4 digits of any	number you use to id-		or's accoun	t: 4	9	8 6	<u> </u>
Property address:	2434 Arlington Court						
	Number Street			_			
	Zanezville	ОН	43701	_			
	City	State	ZIP Code	_			
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on the creditor's of this response i	claim. Creditor asserts s:	that the total pro					
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Name Middle Name Last Name

Case number (if known) 2:17-bk-53597

Part 4:

Itemized Payment History

If the creditor disagrees in Part 2 that the prepetition arrearage has been paid in full or states in Part 3 that the debtor(s) are not current with all postpetition payments, including all fees, charges, expenses, escrow, and costs, the creditor must attach an itemized payment history disclosing the following amounts from the date of the bankruptcy filing through the date of this response:

- all payments received;
- all fees, costs, escrow, and expenses assessed to the mortgage; and
- all amounts the creditor contends remain unpaid.

Part 5:

Sign Here

The person completing this response must sign it. The response must be filed as a supplement to the creditor's proof of claim.

Check the appropriate box::

- ☐ I am the creditor.
- I am the creditor's authorized agent.

I declare under penalty of perjury that the information provided in this response is true and correct to the best of my knowledge, information, and reasonable belief.

Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this response applies.

Date 11,22,2021

Signature

Print Moll

Molly Slutsky Simons

Last Namo

Attorney for Creditor

Company

Sottile and Barile, Attorneys at Law

If different from the notice address listed on the proof of claim to which this response applies:

Address

394 Wards Corner Road, Suite 180

Number Stree

Loveland OH 45140

City State ZIP Code

Contact phone (513) 444_4100

 $_{\text{Email}}$ bankruptcy@sottileandbarile.com

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO COLUMBUS DIVISION

In Re: Case No. 2:17-bk-53597

Kimberly K. Mitchell fka Kimberly McGrail fka Kimberly Wagner aka Kim Mitchell

Chapter 13

Debtor. Judge C. Kathryn Preston

CERTIFICATE OF SERVICE

I certify that a copy of the foregoing Response to Notice of Final Cure Payment was served **electronically** on November 22, 2021 through the Court's ECF System on all ECF participants registered in this case at the e-mail address registered with the Court

And by **first class mail** on November 22, 2021 addressed to:

Kimberly K. Mitchell, Debtor 2434 Arlington Ct. Zanesville, OH 43701

Respectfully Submitted,

/s/ Molly Slutsky Simons

Molly Slutsky Simons (0083702) Sottile & Barile, Attorneys at Law 394 Wards Corner Road, Suite 180

Loveland, OH 45140 Phone: 513.444.4100

Email: bankruptcy@sottileandbarile.com

Attorney for Creditor